

Late Contribution Report

Type or print in ink.
Amounts may be rounded to whole dollars.

LATE CONTRIBUTION REPORT

NAME OF FILER Brown for Governor 2010 Exploratory Committee			Date of This Filing 02/24/2010	Date Stamp Page 1 of 5	CALIFORNIA FORM 497 For Official Use Only
AREA CODE/PHONE NUMBER (510)628-0202	I.D. NUMBER (if applicable) 1321867	Report No. 20100224-5143549			
STREET ADDRESS					
CITY Oakland	STATE CA	ZIP CODE 94607-4337			
			<input type="checkbox"/> Amendment to Report No. _____ (explain below)		
			No. of Pages 5		

Late Contribution(s) Received

DATE RECEIVED	FULL NAME, MAILING ADDRESS AND ZIP CODE OF CONTRIBUTOR (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CONTRIBUTOR CODE *	IF AN INDIVIDUAL ENTER OCCUPATION AND EMPLOYER (IF SELF-EMPLOYED, ENTER NAME OF BUSINESS)	AMOUNT RECEIVED
02/15/2010	Bikram's Yoga College of India LP Los Angeles, CA 90035-4604	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,900.00
02/15/2010	San Bernardino County Safety Employees Benefit Association (SEBA) San Bernardino, CA 92408-4200 ID# 822554	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,900.00
02/15/2010	San Bernardino County Safety Employees Benefit Association (SEBA) San Bernardino, CA 92408-4200 ID# 822554	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$13,400.00

*Contributor Codes

IND - Individual
 COM - Recipient Committee (other than PTY or SCC)
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02/20/2010	IBEW Local Union No. 302 Martinez, CA 94553-4196 ID# 840975	<input type="checkbox"/> IND <input checked="" type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
02/22/2010	Rite Aid Corp. Harrisburg, PA 17105-3165	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
02/15/2010	Bikram's Yoga College of India LP Los Angeles, CA 90035-4604	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$25,900.00

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02/19/2010	Peter Lowy Los Angeles, CA 90025-1747	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Westfield America	\$25,800.00
02/19/2010	Peter Lowy Los Angeles, CA 90025-1747	<input checked="" type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC	CEO Westfield America	\$25,800.00
02/17/2010	7-Eleven, Inc. Dallas, TX 75201-2504	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$10,000.00

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02/17/2010	AES The Woodlands, TX 77380-3283	<input type="checkbox"/> IND <input type="checkbox"/> COM <input checked="" type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		\$5,000.00
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		
		<input type="checkbox"/> IND <input type="checkbox"/> COM <input type="checkbox"/> OTH <input type="checkbox"/> PTY <input type="checkbox"/> SCC		

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Late Contribution(s) Made

DATE MADE	FULL NAME, MAILING ADDRESS AND ZIP CODE OF RECIPIENT (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	CANDIDATE AND OFFICE OR MEASURE AND JURISDICTION	AMOUNT OF CONTRIBUTION	DATE OF ELECTION (IF APPLICABLE)

Reason for Amendment: